## RECEIVED CENTRAL FAX CENTER SEP 0 5 2008

FAX TRANSMISSION	
DATE: September 5, 2008	
PTO IDENTIFIER: Application Number 10/615,158-Conf. #8240 Patent Number	
Inventor: Jeffrey P. Gilbard	
MESSAGE TO: US Patent and Trademark Office	
FAX NUMBER: (571) 273-8300	
FROM: EDWARDS ANGELL PALMER & DODGE LLP	
Jonathan M. Sparks, Ph.D.	
PHONE: (617) 517-5543	
Attorney Dkt. #: 2022(200696)	
PAGES (Including Cover Sheet):3	
CONTENTS: Certificate of Transmission (1 page) Revocation of Power of Attorney or Authorization of Agent (1 page)	
If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (617) 517-5543 and send the original transmission to us by return mail at the address below.	
This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.	
EDWARDS ANGELL PALMER & DODGE LLP P.O. Box 55874, Boston, Massachusetts 02205 Telephone: (617) 239-0100 Facsimile: (617) 227-4420	

## RECEIVED CENTRAL FAX CENTER

SEP 0 5 2008

PTO/SB/97 (09-04)

Approved for use through 07/31/2006. OMB 0861-0031
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application No. (if known): 10/615,158

Attorney Docket No.: 2022(200696)

## Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence i	s being facsimile transmitted to the United
States Patent and Trademark Office.	_

September 5, 2008 Date

Jonathan M. Sparks, Ph.D. Typed or printed name of person signing Certificate 53,624 (617) 517-5543 Registration Number, if applicable Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Revocation of Power of Attorney or Authorization of Agent (1 page)

SEP 0 5 2008

PTO/SB/82 (01-08) Approved for use through 12/31/2008. OMB 0651-0035 U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number, 10/615,158-Conf. #8240 Application Number July 7, 2003 **REVOCATION OF POWER OF** Filing Date **ATTORNEY WITH** Jeffrey P. Gilbard First Named Inventor **NEW POWER OF ATTORNEY** AND Art Unit 1618 **CHANGE OF CORRESPONDENCE ADDRESS** Z. A. Fay Examiner Name 2022(200696) Attorney Docket Number I hereby revoke all previous powers of attorney given in the above-identified application. A Power of Attorney is submitted herewith. OR I hereby appoint the practitioners associated with the Customer Number: 21874 Please change the correspondence address for the above-identified application to: The address associated with Customer Number: OR Firm or Individual Name Address City Country State Ζīρ Telephone Email I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71, Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Signature Name Jeffrey P. Gilbard, M.D. Date رکون کون Telephone 30/0111 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one algorithm is required, see below.

forms are submitted.